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Declaration

(Please tick before you sign)

- All the information provided in this form is correct and accurate to the best of my knowledge.
- I am happy to attend any meeting with relevant persons required to resolve the issue.

Signature:

Date:

Office Use Only

Complaint/Appeal Receiving Staff member:	
Date:	
Name of members in panel for resolving the issue	
Actions proposed:	
Implementation of Proposed action by:	<input type="checkbox"/> Continuous improvement Request. <input type="checkbox"/> Counselling by the relevant persons. <input type="checkbox"/> Change of any service or member. <input type="checkbox"/> External Counselling agency <input type="checkbox"/> Other (Please specify)

<p>Method to communicate the outcome with the complainant/appellant and date</p>	<p><input type="checkbox"/> If Appeal was successful - then 'Appeal successful' email is sent.</p> <p><input type="checkbox"/> If Appeal was unsuccessful - then 'Appeal unsuccessful' email is sent.</p> <p><input type="checkbox"/> Appeal entry recorded on register</p> <p>Staff: _____</p> <p>Date: _____</p>
<p>Response of complainant/appellant</p>	<p><input type="checkbox"/> Agrees and accepts the decision done by panel (The student signs the acceptance, and the record is placed in student's admin file)</p> <p><input type="checkbox"/> Disagrees and unhappy (Student Support Officer will contact student to help student to access services of Overseas Student Ombudsman)</p>
<p>Outcome</p>	<p><input type="checkbox"/> Successful <input type="checkbox"/> Unsuccessful</p> <p>Reason/s for the Outcome:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>HILTON ACADEMY representative: _____</p> <p>Signature: _____</p> <p>Date: _____</p>

Declaration by complainant/Appellant

(Please tick before you sign):

- I acknowledge that I have been communicated the outcome of the complaint/appeal lodged by me.
- I agree to the decision made by the panel and happy to accept it.
- I disagree to the decision made by the panel and would like to escalate it to an external body, and I have been advised of all the required information in this regard.

Signature: _____

Date: _____

Print Name: _____

Signature of HILTON ACADEMY representative: _____

Date: _____

Print Name: _____